

For this regulation proposal, added text is indicated by underline.

15 CCR § 3365 is added to read:

§3365. Suicide Prevention and Response.

(a) Each institution head shall ensure that all employees whose assignments routinely involve inmate contact are trained to recognize signs and symptoms associated with suicide risk, the appropriate procedures for staff intervention, and the appropriate procedures to be followed in response to emergency situations resulting from self-injurious or suicidal actions. This training shall be conducted as in-service training, in compliance with Section 3435.

(b) Each institution head shall implement a Suicide Prevention Program for inmates who display self-injurious or suicidal behavior or symptoms. These programs shall include the following components:

(1) Suicide Watch. When medical staff determine that an inmate is actively suicidal, a licensed physician or psychologist shall order placement of the inmate on suicide watch in a General Acute Care Hospital (GACH), Correctional Treatment Center (CTC), Skilled Nursing Facility (SNF), Outpatient Housing Unit (OHU), or other appropriate health care facility, for constant one-on-one observation.

(2) Suicide Precaution. When medical staff determine that an inmate is at high risk of attempting self-injurious behavior, a licensed physician or psychologist shall order placement of the inmate on suicide precaution in a GACH, CTC, SNF, OHU, or other appropriate health care facility, for periodic monitoring.

(3) Follow-up Treatment. Discharge from suicide watch or suicide precaution shall occur when an interdisciplinary team of licensed clinicians determines that the inmate no longer presents a suicide risk. A written treatment plan and follow-up outpatient treatment shall be provided by a licensed physician or psychologist.

(c) When a suicide attempt is discovered in progress, medical assistance shall be summoned immediately to provide emergency medical care. Security and safety procedures shall be followed, including the use of required equipment and procedures to deal with bodily fluids. A cut-down kit shall be immediately accessible on each unit and shall be used by staff in case of an attempted suicide by hanging. All subsequent activities and procedures shall comply with local institutional emergency plans, as developed in compliance with Section 3301.

NOTE: Authority cited: Section 5058, Penal Code. Reference: Section 5054, Penal Code.